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Bib Data Sheet

CONFIRMATION NO. 9925

<b>SERIAL NUMBER</b> 10/526,728	<b>FILING OR 371(c) DATE</b> 03/04/2005 <b>RULE</b>	<b>CLASS</b> 210	<b>GROUP ART UNIT</b> 1709	<b>ATTORNEY DOCKET NO.</b> 042513.013US
<b>APPLICANTS</b> Alan D. Harrison, Douglasville, GA; Patrick Sisk, Marietta, GA;				
<b>** CONTINUING DATA *****</b> <i>cl</i> This application is a 371 of PCT/US03/27768 09/04/2003 which claims benefit of 60/408,095 09/04/2002				
<b>** FOREIGN APPLICATIONS *****</b> <i>cl</i>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Allowance Acknowledged <i>Camron G. Allen</i> <i>cl</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GA	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 17
				<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 25461				
<b>TITLE</b> Disinfection of reverse osmosis membrane				
<b>FILING FEE RECEIVED</b> 600	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	